| | TTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) or OVERNMENTAL AGENCY: | FOR COURT USE ONLY |
|---------------|---|---------------------------------|
| L | | |
| | | |
| _{TE} | ELEPHONE NO. (Optional): FAX NO. (Optional): | |
| | IAIL ADDRESS (Optional): | |
| | ATTORNEY FOR (Name): | |
| S | UPERIOR COURT OF CALIFORNIA, COUNTY OF | 1 |
| | STREET ADDRESS: | |
| | MAILING ADDRESS: | |
| | CITY AND ZIP CODE: | |
| | BRANCH NAME: | |
| | CHILD'S NAME: | |
| | PETITIONER: | |
| | RESPONDENT: | |
| | OTHER PARENT: | |
| | APPLICATION AND ORDER FOR APPOINTMENT OF GUARDIAN AD LITEM OF MINOR—FAMILY LAW EX PARTE | CASE NUMBERS: |
| | NOTE: This form is for use in family law proceedings with the exception of dissolution a guardian ad litem in civil proceedings, use form 982(a)(27). For appointment of a proceedings, use form DE-350/GC-100. | |
| 1 | I (name): | am the |
| | a. attorney for | am and |
| | (1) minor. | |
| | (2) parent of the minor. | |
| | (3) other interested person (specify name and relationship): | |
| | b. parent of the minor. | |
| | c other interested person. | |
| | d minor (answer all that apply to you): | |
| | (1) My date of birth is (specify): | |
| | (2) I live with my mother father legal guardian other (| specify name and relationship): |
| | (3) My mother's name is (specify): | , and her address is: |
| | (4) My father's name is (specify): | , and his address is: |
| | (5) I have a legal guardian. My legal guardian's name is (specify): | , and his |
| | or her address is: | , and mo |
| | The guardianship was established in: | County, case no. (if known): |
| 2 | I ask the court to appoint the following person as guardian ad litem for the minor (state n | |
| | to act the appears the following person as general as the mention (content to | , |
| 3. | The relationship of the person listed in item 2 to the minor is | |
| ٠. | a. parent | |
| | b. other (specify): | |
| 4 | Appointment of a guardian ad litem is necessary because (specify): | |
| •• | Treatment of a guarante as morn to hospitally account (aparity). | |
| | | |
| | | |
| | | |
| | | |
| | Continued on Attachment 4 (describe in detail, attach additional pages if necessar | y). |

| CHILD'S NAME: | CASE NUMBERS: |
|---|---|
| PETITIONER: | |
| RESPONDENT: | |
| OTHER PARENT: | |
| | |
| F. The prepared quardies ad litem is fully competent to underete | and and protect the rights of the minor and has no interests conflicting |
| with those of the minor. | and and protect the rights of the fillinor and has no interests conflicting |
| With those of the filmer. | |
| Date: | |
| Duto. | |
| | \ |
| | • |
| (TYPE OR PRINT NAME) | (SIGNATURE OF APPLICANT) |
| | |
| | |
| CONSENT TO ACT A | AS GUARDIAN AD LITEM |
| | |
| I consent to the appointment as guardian ad litem and agree to a | ssume the responsibilities. |
| | |
| | |
| Date: | |
| | |
| | |
| | <u>/</u> |
| (TYPE OR PRINT NAME) | (SIGNATURE OF PROPOSED GUARDIAN) |
| | |
| CONSENT TO GUARDIAN BY M | INOR 14 YEARS OF AGE OR OLDER |
| | |
| I, (name): | , am (specify age): years of age and hereby nominate |
| (name): | to be my guardian ad litem to represent my interests for the |
| reasons set forth in items 4 and 5 of this application. | , g, |
| | |
| Date: | |
| | |
| | \ |
| | <u>/</u> |
| (TYPE OR PRINT NAME) | (SIGNATURE OF PETITIONER) |
| | |
| ORDER | ☐ EX PARTE |
| THE COURT FINDS | |
| It is reasonable and necessary to appoint a guardian ad litem for | the person named in the application, as requested above |
| the reasonable and necessary to appear a guardian au moin for | and porcon married in the application, as requestion above. |
| THE COURT ORDERS that (name): | is hereby appointed guardian ad |
| litem of (name): | for the purposes hereinabove set |
| forth in item 4 of the petition. | ··· |
| | |
| Application for Appointment of Guardian ad Litem filed (date): | |
| a is denied. | |
| b. is granted. | |
| c. is set for hearing on (date): | at (time): |
| | |
| | |
| Date: | |
| | JUDICIAL OFFICER |
| | SIGNATURE FOLLOWS LAST ATTACHMENT |